



Special Event Permit Application

1. Event Name: _____
2. Event Date(s): _____
Alternate date(s): _____
3. Name of Organization: _____
Street Address: _____
City/State/Zip: _____

First Contact Person: _____
Work Phone: (____) _____ - _____ Fax: (____) _____ - _____
Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Second Contact Person: _____
Work Phone: (____) _____ - _____ Fax: (____) _____ - _____
Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Promoter, if different from Organization: _____
Promoter Contact: _____
Promoter Phone: (____) _____ - _____ Fax: (____) _____ - _____

4. Give a brief description of the event: _____

5. Is this a first time event? _____ if no, last year that event was held: _____
Please list any variations from the previous year: _____

6. Festival Location: Park _____ Street _____ Park and Street _____
Name of Park and/or Street(s): _____

7. Event Type: **(check all that apply)**
Carnival _____ Concert _____ Filming _____ Parade _____ Fireworks _____ Run/Walk _____
Festival _____ Sporting Event _____
Other _____ (describe) _____

8. Festival Operation Schedule (specify day, date and times):
Indicate **S** for set up, **E** for event day, **T** for tear down.
(If more room is needed, list on a separate sheet of paper.)

9. Estimated attendance per day: _____

(Continued on Back)

10. Is this a charity event? Yes _____ No _____

If yes, please list name of organizations, contact name, phone number and address for each Organization:

<u>Organization</u>	<u>Contact Name</u>	<u>Address</u>	<u>Phone No.</u>
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_____	_____	_____	_____
_____	_____	_____	_____

11. Will this event be open to the public _____ or by invitation only _____

12. Will admission be charged? Yes _____ No _____

13. Will donations be taken? Yes _____ No _____

14. List all the streets you propose to close:

Street (indicate cross streets) Closing Date and Time Opening Date and Time

(i.e: Broadway (Chestnut Exp to Brower) Close 12/14/09 10:00 am; Open 12/16/09 9:00 pm)

_____	_____	_____
_____	_____	_____

(If more room is needed, list on a separate sheet of paper and attach to the application)

15. Will food be served _____ and/or prepared _____ at your event?

How many food vendors do you anticipate having _____

How will food be prepared: LP gas grill _____ Charcoal grill _____ Electric grill _____

16. Will alcoholic beverages be available at your event? Yes _____ No _____

If so, please answer all of the following:

a) What type of alcoholic beverages will be available:

Beer _____ Wine _____ Spirituous Liquor _____

b) Will alcoholic beverages be sold by the drink _____ or given away _____

c) Note what days, dates and times alcoholic beverages will be available:

17. Will there be any live entertainment or music at your event? Yes _____ No _____

If so, please answer all of the following:

a) Will stages be built? Yes _____ No _____ If yes, how many _____

b) What time will the performances take place each day:

Date	Start Time	Finish Time
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_____	_____	_____
_____	_____	_____

18. Will additional electrical wiring be installed for your event? Yes _____ No _____

19. Will you be using generators _____ and/or utility power _____

20. Will tents be erected for your event? Yes _____ No _____ If so, how many _____

21. Will you require access to water? Yes _____ No _____

22. Will your event require restroom facilities? Yes _____ No _____

23. Have you arranged for security at your event? Yes _____ No _____

If so, who will be providing security: _____

24. Describe your plans for Emergency Medical Services: _____

25. Describe your plans for trash removal, as well as any organizations or persons directly involved with this aspect of the event: _____

(Continued on next page)

Additional City Permits/Licenses/Insurance Certificates may be required. Applicant is responsible to obtain all additional permits/licenses/insurance certificates required upon the issuance of this use permit.

Applicant must check and agree to abide by the following conditions to obtain this permit:

() CLEAN UP - Applicant agrees to promptly clean up all paper or debris caused by applicant's use of the area and understands that if such clean up is not promptly undertaken the City reserves the right to do the cleaning itself and to charge the applicant for the actual time and expense incurred (bond or cash security may be required if attendance exceeds 1,000 persons).

() INSURANCE - Applicant agrees to provide a policy of liability insurance in the amount of \$300,000 per person, \$2,000,000 in the aggregate, naming the City of Springfield as an additional named insured, with appropriate endorsements as required by the City's Risk Management Administrator.

() INDEMNITY - Applicant agrees to defend, indemnify and hold the City of Springfield harmless from and against all claims, losses, and liability arising out of personal injuries, including death, and damage to property which are caused by Applicant, or arising out of or in any way connected with the activities conducted pursuant to this application.

() CITY CODES/PERMITS - Applicant has received and read a copy of Section 6-1500 of the City's Zoning Ordinance pertaining to Noise Standards. Applicant agrees to abide by all conditions as specified in the ordinance. Applicant also agrees to obtain all City permits and licenses that may be required, and shall comply with all other City laws and other conditions that the City Manager determines necessary.

() CONDUCT/NUISANCES - Applicant understands that if the outdoor activity is conducted in such a way as to create a nuisance for any business or resident of the area, future permits may be denied for that reason alone. Applicant will be notified as soon as practical that the activity engaged in created a nuisance and may ask for a review of such determination.

This application will not be processed unless a **site map** is included. Indicate location of tents, stages, portable rest rooms, fencing, food booths, alcoholic and non-alcoholic beverage booths, etc. Also indicate where streets will be blocked and how (fencing, barricades, stages, tents, etc.).

The Department of Building Development Services must be informed of any changes to the information provided in this document or to the site map.

Print Name

Signature

Phone Number

Date

Return the completed application along with a check for **\$45.00** made out to City of Springfield, to Building Development Services, 840 Boonville Ave., Springfield MO 65802. If you have any questions regarding an event or this application, please contact Jeff Volkmer at (417) 864-1064.